access to treatment for addiction in health plans for all Americans. Sincerely,

MICHAEL M. MILLER, President and Board Chair.

SUICIDE PREVENTION ACTION NETWORK USA, Washington, DC, March 3, 2008.

Hon. NANCY PELOSI, Speaker, House of Representatives, Washington, DC. Hon. JOHN BOEHNER, Minority Leader, House of Representatives,

Washington, DC.

DEAR MADAM SPEAKER AND LEADER BOEHNER: On behalf of the Suicide Prevention Action Network USA (SPAN USA), I am writing to express our support for HR 1424, the Paul Wellstone Mental Health and Addiction Equity Act. This landmark legislation would prohibit insurance discrimination against 80 million Americans suffering from addiction and mental illness.

Our country cannot afford to wait to pass this legislation. The cost of doing nothing to help people with their mental health and addiction problems is staggering. Each year, more than 31,000 individuals die by suicide and 1.3 billion work days are lost due to mental health and substance abuse disorders, more than arthritis, stroke, heart attack and cancer combined. Moreover, workers with untreated depression cost their employers \$31 billion a year in lost productivity and workers with untreated alcoholism cost their employers \$135 billion in lost productivity each year.

The time for the passage of parity is now. Far too many individuals who complete suicide have never seen a mental health professional. Legislation to bring full equity to mental health coverage has been introduced in the House in every Congress since the 107th session but until this year, it never received consideration in committees or on the floor despite having over 218 bipartisan cosponsors. Now, the Paul Wellstone Mental Health and Addiction Equity Act (H.R. 1424), introduced by Representatives PATRICK KEN-NEDY (D-RI) and JIM RAMSTAD (R-MN), has the support of the majority of the House with 273 cosponsors. The bill has been favorably reported by all three committees of jurisdiction. Lastly, fourteen field hearings documenting the need for equity in health plans for the treatment of addiction and mental illness were held in 2007.

Because of the critical nature of this legislation, we support passage of H.R. 1424. SPAN USA stands ready to assist you toward the goal of achieving fairness in health plans for all Americans

Sincerely,

JERRY REED, Ph.D., M.S.W., Executive Director, Suicide Prevention Action Network USA.

# HONORING LORNA MULLINGS

## HON. EDOLPHUS TOWNS

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES Wednesday, March 12, 2008

Mr. TOWNS. Madam Speaker, I rise today in recognition of Lorna Mullings, a remarkable woman who after a 13-year career in banking, pursued her real passion of nursing. So in 1986, as a new immigrant, an active church worker, a wife and mother of two small children, Lorna Mullings decided to return to school and become a Registered Nurse.

In June of 1992, she graduated from St. Joseph College with a bachelors degree in nurs-

ing, Amid the cheers of her now teenage children, she graduated Hunter College with a double masters in nursing and public health in 2002. However, midway through pursuing her masters degree which was focusing on HIV/ AIDS, she was doing course work on health disparities among developed and developing countries when "something hit home." There was a definite connection with a previous paper in her undergraduate studies in which she documented her life's goal to work among the poor people of Somalia. This was also a time of defining professional and personal dreams and because her belief in God was so strong, she knew that becoming a missionary nurse was her special calling.

With her pastor's/husband's approval, blessing, and backing, she formed the Dorcas Medical Mission in 1999. In 2000, Lorna planned and implemented the mission's first outreach to Kingston, Jamaica. Since that time, she has led 15 medical missions to nine countries, bringing free dental, medical, surgical, food and clothing to thousands of needy families worldwide. In addition to these missions, she is currently in the process of opening an orphanage in Alexandria, South Africa for the caring of children left orphaned by parents who were victims of HIV/AIDS.

Lorna Mullings has worked as a nurse for over 15 years in the areas of medical, surgical, endoscopy, recovery, psychiatry, administration and community health. Today, she works as a nurse manager at the Interfaith Medical Center, managing the pediatric and medical surgical units.

Madam Speaker, Ms. Mullings is well deserving of our respect for her humanitarian works and charitable outreach—she went on to initiate the Rugby Feeding Program, which now feeds over 70 homeless people with hot meals 4 days a week and heads the Rugby Family Services. Her compassion for the less fortunate is indeed noteworthy, and I am proud to recognize her today.

### KATHERINE HOFFMAN

### HON. SAM GRAVES

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 12, 2008

Mr. GRAVES. Madam Speaker, I proudly pause to recognize Katherine Hoffman of Trenton, Missouri. Katherine is a very special young woman who has exemplified the finest qualities of citizenship and leadership by taking an active part in the Girl Scouts of America, and earning the most prestigious award of Girl Scout Gold Award.

Katherine has been very active with her troop, participating in many scout activities. In order to receive the prestigious Gold Award, Katherine has completed all seven requirements that promote community service, personal and spiritual growth, positive values and leadership skills.

Madam Speaker, I proudly ask you to join me in commending Katherine Hoffman for her accomplishments with the Girl Scouts of America and for her efforts put forth in achieving the highest distinction of Girl Scout Gold Award.

HONORING CORN BELT POWER COOPERATIVE

#### HON. TOM LATHAM

OF IOWA

IN THE HOUSE OF REPRESENTATIVES  $We dnesday,\ March\ 12,\ 2008$ 

Mr. LATHAM. Madam Speaker, I rise today to congratulate Corn Belt Power Cooperative of Humboldt, Iowa, on the occasion of their 60th anniversary.

Before 1947, electric cooperatives were unable to keep up with farmers' additional need of electricity to power their homes and farms, and power companies in the cities were wary of selling electricity to rural lowa. As a result of the increased demand, two smaller power cooperatives merged to create a partnership that could build a larger coal-fired generation, thus forming Corn Belt Power.

In the early years, Corn Belt Power was a source for electric lights, storing and preparing food in rural homes, pumping water, and bringing ease to daily farm chores. Today Corn Belt Power is a source of power for sophisticated livestock systems and computers, heat pumps and efficient heating and cooling systems for homes. Corn Belt Power has withstood many ups and downs, including the energy crisis in the 1970s, the farm crisis of the 1980s, and our need for energy efficiency today.

Corn Belt Power Cooperative of Humboldt is dedicated to benefiting rural lowa and the agricultural community, and for this I offer them my utmost congratulations and thanks. It is an honor to represent the employees of Corn Belt Power, the board of directors, and President Donald Feldman in the U.S. Congress, and I wish them continued success in serving the people of rural lowa.

PAUL WELLSTONE MENTAL HEALTH AND ADDICTION EQUITY ACT OF 2007

SPEECH OF

## HON. DIANA DEGETTE

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES Wednesday, March 5, 2008

Ms. DeGETTE. Mr. Speaker, I would like to have the following letters of support for H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2008, submitted for the RECORD on the floor debate of this bill.

AMERICAN CORRECTIONAL ASSOCIATION,  $Alexandria,\ VA,\ February\ 29,\ 2008.$ 

Hon. PATRICK J. KENNEDY,

Cannon HOB,

Washington, DC.

DEAR REPRESENTATIVE KENNEDY: On behalf of the American Correctional Association and our 18,000 members I'd like to express our full support for your bill, H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2007.

The health care system in our country has neglected the mentally ill long enough and it must change. We in criminal justice and more specifically the corrections profession know first-hand the effect inadequate mental health care has on our communities. Jails and prisons have become defacto mental health hospitals wherein a high prevalence of mental health problems and addiction among inmates is common and recidivism rates are high.

A report issued by the U.S. Department of Justice Bureau of Justice Statistics in September 2006 revealed that more than half of all prison and jail inmates had a mental health problem. BJS also reported that more than two-fifths of state inmates and more than half of jail inmates showed symptoms of mania, 23% of state prisoners and 30% of iail inmates suffer from depression and that 15% of state prisoners and 24% of iail inmates met the criteria for psychotic disorders. 24% of state prisoners and 19% of jail inmates suffered from substance dependence or abuse and an estimated 42% of inmates in state prisons and nearly half of those in local jails were found to have both a mental health problem and a substance dependence or abuse problem.

Without proper care and treatment in a mental hospital, these individuals will never recover or be healthy again nor will they ever be able to live a normal life. Most likely they will continue to recidivate, crowd our facilities, drive up costs throughout the entire criminal justice system and cause harm to others and unto themselves. Quite simply, correctional facilities are not equipped and corrections personnel are not trained to handle the mentally ill individuals.

We appreciate your leadership on this issue and offer you our full support for H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2007.

Sincerely,

GARY D. MAYNARD,

President.

NATIONAL ASSOCIATION OF ANOREXIA NERVOSA AND ASSOCIATED DIS-ORDERS.

Highland Park, IL, March 3, 2008. Re the Paul Wellstone Mental Health and Addiction Equity Act of 2007.

Hon. Patrick J. Kennedy and Hon. Jim Ramstad,

House of Representatives,

Washington, DC.

DEAR REPRESENTATIVES KENNEDY AND RAMSTAD: I am writing on behalf of ANAD, the National Association of Anorexia Nervosa and Associated Disorders, to urge House Members to vote YES on your bill H.R. 1424, the Paul Welistone Mental Health & Addiction Equity Act. ANAD is the nation's oldest organization dedicated to alleviating the problems of eating disorders, with an active membership composed of professionals, sufferers, and their families.

More than 8 million Americans suffering from eating disorders who face overwhelming obstacles to health insurance coverage for mental health treatment fully embrace the passage of this legislation. Eating disorders kill. Anorexia nervosa has the highest mortality rate of any mental illness. By closing the loopholes in the 1996 federal parity law and requiring equity in eating disorders coverage, treatment, and financial requirements, this legislation will greatly assist Americans with these potentially deadly illnesses without a costly burden to employers.

ANAD hopes that passage of your strong bipartisan bill will hasten the completion of negotiations with the Senate on a bill that will cover the full range of mental illnesses and become law this year. Further delay is unacceptable, especially for those whose lives are in peril.

We thank you for your leadership on this important issue.

Sincerely,

VIVIAN HANSON MEEHAN,

President.

EASTER SEALS,
Washington, DC, March 3, 2008.
DEAR REPRESENTATIVE: Easter Seals urges
you to vote to support the passage of H.R.

1424, the Paul Wellstone Mental Health and Addiction Equity Act of 2007. Access to mental health services is essential for anyone to live a healthy life.

Mental health disorders are the second leading cause of disability and premature death in the United States and are often experienced by people with disabilities. Many health insurance plans set cost limits on mental health treatment, but do not impose similar cost limits on other medical and surgical benefits. It is critical that access to mental health services be on par with access to services for other medical conditions. Breaking down barriers to accessing mental health services improves the lives of people with disabilities, strengthens families and saves lives.

We look forward to continuing to work with you as the process moves forward Thank you for considering our views.

Sincerely,

KATHERINE BEH NEAS, Vice President, Government Relations.

SERVICE EMPLOYEES INTERNATIONAL UNION, Washington, DC, March 4, 2008.

DEAR REPRESENTATIVE: The Service Employees International Union (SEIU) urges you to vote "ves" on H.R. 1424, the Paul Wellston Mental Health and Addiction Equity Act. Millions of American families are touched by mental illness and substance abuse disorders, and our workplaces are less productive when mental illness is untreated and stigmatized. H.R. 1424 would require that group health plans cover mental illness on the same terms that it provides for medical and surgical coverage. There is a growing body of evidence that supports the effectiveness of various treatments for people suffering from mental illness and substance disorders. High co-pays deductibles can discourage access to treatment, and arbitrary limits can result in discontinued therapies that would otherwise be effective. Better screening and early treatment is often the most cost-effective treatment. It is time to pass H.R. 1424 and give new hope and treatment to millions of patients and families struggling with mental illness.

Votes on this legislation will he added to the SEW scorecard found at www.seiu.org. If you have any questions, please contact Ann Kempski. Deputy Director of Legislation.

Sincerely.

 $\begin{array}{c} {\rm Anna~Burger,} \\ {\it International~Secretary-Treasurer.} \end{array}$ 

AUTISM SOCIETY OF AMERICA, Bethesda, MD, March 2, 2008.

Hon. PATRICK KENNEDY,

House of Representatives,

Washington, DC.

DEAR CONGRESSMAN KENNEDY: On behalf of the Autism Society of America, we write in strong support of the Paul Wellstone Mental Health and Addiction Equity Act of 2007. This legislation will go a long way to end discrimination by private health insurers by mandating parity in the treatment of mental health coverage.

Autism is a complex developmental disability that typically appears during the first three years of life and affects a person's ability to communicate and interact with others. Autism is defined by a certain set of behaviors and is a "spectrum disorder" that affects individuals differently and to varying degrees. There is no known single cause for autism, nor is there a single treatment.

While there is no single treatment for autism, intensive, sustained special education programs and behavior therapy does improve the function of children with autism, allowing them to increase their communication

skills and learn. Individuals with autism often benefit from mental health treatments including the prescribing of medication and counseling. Beyond these, there are new treatments and interventions on the horizon, and it is important that individuals with autism can access breakthrough therapies.

Your legislation provides equal treatment of mental health insurance benefits compared to medical and surgical benefits specifically with respect to cost sharing requirements, financial requirements, and treatment limitations. Many individuals with autism have co-morbid mental illnesses and would greatly benefit from enactment of this legislation.

ASA, the nation's leading grassroots autism organization, exists to improve the lives of all affected by autism. On behalf of our 200,000 members and supporters across the nation, we thank you for your leadership on this issue, and strongly support you in your efforts.

Sincerely,

LEE GROSSMAN,
President and CEO.

PAUL WELLSTONE MENTAL HEALTH AND ADDICTION EQUITY ACT OF 2007

SPEECH OF

#### HON. JANICE D. SCHAKOWSKY

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Wednesday, March 5, 2008

Ms. SCHAKOWSKY. Mr. Speaker, I would like to have the following letters of support for H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act, submitted for the record on the floor debate of this bill.

March 4, 2008.

Hon. NANCY PELOSI,

Speaker of the House of Representatives, Capitol Building, Washington, DC.

Hon. John Boehner,

Republican Leader, House, Capitol Building, Washington, DC.

DEAR SPEAKER PELOSI AND LEADER BOEHNER: Consumers Union, the nonprofit publisher of Consumer Reports, urges you to support HR 1424, the Paul Wellstone Mental Health and Addiction Equity Act, to prohibit insurance discrimination against 80 million Americans suffering from addiction and mental illness.

Over 25 million people need mental health and addiction treatment but are not getting it. Each year, 1.3 billion work days are lost due to mental disorders, more than arthritis, stroke, heart attack and cancer combined. Moreover, workers with untreated depression cost their employers \$31 billion a year in lost productivity and workers with untreated alcoholism cost their employers \$135 billion in lost productivity each year. The need for equity in health plans for the treatment of addiction and mental illness is well documented—14 field hearings were held around the country in 2007. The time to pass this legislation is now.

H.R. 1424, introduced by Representatives Patrick Kennedy and Jim Ramstad, has the support of the majority of the House with 273 cosponsors. Because of the critical nature of this legislation, we urge you to support HR 1424 and move it to the full floor for a vote as soon as possible.

Sincerely,

GAIL SHEARER,
Director, Health Policy
Analysis, Consumers
Union Washington
Office.